Southeast Alabama MEDICAL

I, Donna Jo Tew, hereby certify and affirm in writing that I am the custodian of Southeast Alabama Medical Center, a hospital organized or operated pursuant to or under the laws of Alabama, located at Dothan, Alabama, that I am custodian of the hospital records of said hospital and that the within copy of said hospital records were made in the regular course of business, and that the within copy of said hospital medical records consisting of 285 pages are and exact, full, true and correct copy of said hospital records for date of service 02/04/1989 to 09/05/2004 pertaining to:

Patient Name: Brackins, Brittney Bianca

Date of Birth: 02/04/1989

All of which I hereby Certify and affirm in writing on this 24th day of February 2004

Team Coordinator, Medical Records

Medical Records Department

